

Medical Clearance Letter for Participation in Physical Activity

Date: \_\_\_\_\_

Re: Clearance for Participation in Physical Activity

Dear \_\_\_\_\_:

\_\_\_\_\_ (Name of patient) recently had a cardiovascular disease risk screening through the Alabama WISEWOMAN Program. During the screening, the participant was asked a question to assess her cardiovascular health. The participant answered "yes" to the following question:

Have you ever been diagnosed by a healthcare provider as having any of the following conditions?

YES \_\_\_\_ NO \_\_\_\_

Coronary heart disease or chest pain; heart attack; heart failure; stroke/transient ischemic attack (TIA); vascular disease; congenital heart defects

The Alabama WISEWOMAN guidelines require that participants who answer "yes" to the above question receive medical clearance concerning whether or not to participate in low to moderate intensity physical activity, such as slow to brisk walking.

Please indicate below, in the appropriate category, whether it is safe for the participant to engage in low to moderate physical activity and indicate any restrictions that may apply.

The participant: \_\_\_\_\_

\_\_\_\_\_ can participate in physical activity with no restrictions

\_\_\_\_\_ can participate in physical activity with the following restrictions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ CANNOT participate in physical activity

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_